Is the placebo story a distraction?

The important story involves the unanswered questions from the PEI, as a start.

JESSICA ROSE
7/11/2023

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I must say that it feels like there is a global witch hunt going on, where even regular, 'nice' people are carrying tiki torches to roast those floating ducks. It is vital in these times of confusion - filled with so many disparate opinions and ideas - to hold very strongly onto data and compelling evidences that arise from experimental repeats. Responsible journalism exists, but I must admit, there are very few sources I trust nowadays.

In my mind, if someone is 'wrong' in a claim, then the analysis (if there is one) that led to the claim must be challenged, but in a non-personal way. No need to emotionalize what needs not be emotionalized. No need for sensational headlines. [1]

This is how we advance our knowledge and make scientific advances and prevent ourselves from becoming an angry mob.

You gotta love Monty Python. This is quite the same logic as has been used (effortlessly referred to as 'The Science") for 3 years, non? A woman is a witch because she burns because she is made of wood, and since wood floats in water like a duck does, then she must be a witch since she weighs the same as a duck by their measurement. Just like how people who have been injured by the COVID-19 shots who acknowledge their own suffering are "anti-vaxxers". Hey numb-skulls, women aren't made of wood and vaccine-injured people are injured *because* they are **pro-vaccine**.

Getting the story right and truth-telling is vital, and criticism is a vital part of getting to the 'truth'. I once wrote on the **value** of criticism as opposed to the **purpose** of hit-pieces. The latter classically involve attempts to manipulate public opinion through the elegant ***appearance*** of objective reporting, rather than being an objective report. These ideas lead us into the next section.

On the 'yellow dot lots are placebo' saga

The main point of interest to me **at this point** in the yellow-dot-clot-shot-lot-not placebo saga - I mean, besides what in the flip-flip a 'placebo' actually is to a vaccine-maker cuz it ain't saline - are the unanswered questions raised by Dr. Gerald Dyker and Prof. Dr. Jörg Matysik in a video that I encourage all to watch. They provide valuable evidences of their persistent attempts to get answers from the Paul Ehrlich Institute (PEI) on a wide range of COVID-19 injection-related topics. Answers to such vital questions like: who released the yellow dot lots?

By the way, on the subject matter of 'placebos', Drs. Dyker and Matysik merely suggested in this video "*a suspicion* that maybe they are actually *something like placebos*". This suspicion was raised because almost all of the yellow dot lots from the Danish study [2] had *not* been released by the PEI and in fact, they have asked the PEI who, in fact, *did* release them, and on what basis.

This is a question that needs answering. We wait with bated breath.

Importantly, Dr. Dyker explicitly states that placebos contain elements other than simple saline. But this, by definition, is not a placebo. Anyone can call it that all they want, but it doesn't make it so. A placebo - saline, for example - as an injection *is* inert and the reason why we would use saline as a placebo for injection is because we know that there will be no adverse events associated with injecting saline. In this way, we can *reasonably* and more accurately compare these non-effects to say, the effects emerging from an injection with an experimental drug.

N.B. Empty LNPs do not comprise placebos.

I think it would be awesome for everyone to read this article I wrote on 'placebos' in June 2022 where I state that both Pfizer and Moderna have to explain the SAE (serious adverse event) data from placebo in their trials whereby they have the following options:

> **The placebo was not saline and induced SAEs - I want to know what that placebo is in this case** (FOIA)
>
> **The placebo was saline as indicated and something else induced the SAEs - a reasonable explanation would be SAEs induced by other vaccines given as per the schedule.**

At this point, I think it's really important for everyone to converge on the fact that the word 'placebo' *must* have specific meaning in the context of an injectable product trial, and that is: saline. Anything else, in NOT a placebo. Words carry meaning, and appropriate word use is very important. Maybe if we can converge on this, the following problems could be resolved.

The 'yellow dot placebo' debate has grown quite 'heated' - and believe me, I understand that in this context, all publicity might be good publicity in terms of putting the PEI in the hot seat and getting some bloody answers. But the problem with going all-in with the 'they are placebos' story is the distractive element spawned from 1. semantics and 2. sensationalism. [It is interesting to me to watch as we counter each other on this-and-that, when in fact, we all want the same thing; like answers to questions about the quality control of these COVID-19 shots.]

1. Semantics because the meaning behind the word 'placebo' has been usurped. The vaccine industry has absconded the word 'placebo' and imposterized it with 'an everything but' injection. What I mean is, what they are injecting and calling 'placebos' are often all ingredient-inclusive - except for the proteins that induce the immune response. As part of some of the ingredients are adjuvants, and often times the adjuvant is aluminum. If you include aluminum as an adjuvant to a 'placebo' injection, and a person experiences an adverse event, and another person is injected with the full meal deal, and subsequently experiences the *same* adverse event, then the adverse event in question, which was experienced in the 'placebo' context, will not count as a reaction to the vaccine. See the problem? This is INSANE. All of those adverse events, which could be SAEs, would be written off.
2. Sensationalism because running with '1/3 of shots are placebos' as a story is irresponsible, especially when making claims about what specific individuals are saying or not saying. It is irresponsible because I would bet that at least some of the journalists misusing the word 'placebo' know that they are doing so (or at least they should know) and it distracts away from the real issue: the lack of answers. We all know the shots have different effects on different subsets of the population, and they really shouldn't. They should all be identical without contaminants and without impurities from a manufacturing point of view, and handled by administrators in the appropriate way so as to ensure delivery of the actual product from an administration point of view. Having said that, I think the whole mRNA injectable thing should END. Now.

Clearly, journalists need to be very responsible at this point in time, and in my opinion on this particular subject matter, need to be very supportive *in an authentic way* of people like Schmeling *el al.* and Drs. Dyker and Matysik - who simply saw something out of place and requested to know why - and to all the people engaged with fighting for a bit of justice. We don't need to sensationalize the truth - it's sensational enough.

However, the annoying repercussions of sensationalized headlines are multi-fold but primarily, they involve truth concealment.

The PEI - and all the regulators and responsible entities - need to be put in the hot seat. And kept there. We need to find out who the unknown non-PEI entity is who gave the green light to the yellow dots (the PEI did not give this green light in the context of the 17/18 of the yellow dots, as we all know). This would be far more productive than arguing over the placebo-ness of the yellow dot lots. And this is a way in which we may be able to hold criminals accountable.

Conclusions

Ultimately, the word 'placebo' has no meaning in the context of the vaccine industry, in my opinion. Meaning, there is no 1 saline-solution placebo used in all vaccine or injectable product trials, as there should be. If placebo-controlled studies exist, PLEASE, prove me wrong and send them to me so I can read them. And please, for the love of God, if anyone in a position to force disclosure of placebo contents is reading this, please force disclosure of placebo contents for placebos listed in *any* clinical trial data available online, and from subsequent studies.

For now, I say let's focus on getting the PEI to answer the afore-mentioned questions? Let's focus on why the free text was scrubbed from the foreign data. I realize that I might just be behind the thought projections of the people engineering outcomes here, and that it is therefore possible that the placebo story was launched with great intention in order to get the PEI in the hot seat. If this is case, then I say to the engineers, well-played.

But, I still believe wholeheartedly that without sticking to the truth which comes with *meaning*, we will be doomed to fail ultimately. We don't need anything but the truth and to try to 'win' even with half-truths will be akin to paddling upstream in a tormented river of distractions.

So at the risk of yet a bigger pile-on, I say: there are no placebos to consider in the context of commercial distribution of modified mRNA products. There are clearly batches that appear more harmful as per reports of serious adverse events. We need to know what entity 'released' the batches that appear less harmful as per the Danish study. If this entity is some private EU crew, then I would like to know their qualifications and under what circumstances they made the decision to release those particular lots and why, if the PEI is the entity that is meant to release lots, they did not. Just as a start. God speed to Drs. Dyker and Matysik and to Max, Vibeke and Peter, and to all the FOIA-requesters working diligently to get us some justice.

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[1] "They don't even have to be real. Find a face, make up a crime. Run sensational headlines! Works every time." Jello Biafra

[2] Schmeling M, Manniche V, Hansen PR. Batch-dependent safety of the BNT162b2 mRNA COVID-19 vaccine. Eur J Clin Invest. 2023 Mar 30:e13998. doi: 10.1111/eci.13998. Epub ahead of print. PMID: 36997290.

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Hugh McCarthy Writes Hugh's Newsletter Jul 11 Liked by Jessica Rose

Of course the stories of vaccine injuries are important.

The main issue is why were the "vaccines" needed at all-with a 99%+ survival chance. The reality is they were not-so the story becomes why were they developed and mandated ---that is what needs exposed.

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philipat Jul 11·*edited Jul 11* Liked by Jessica Rose

Definitely under no circumstances Placebos in terms of the real definition of the word. It's a much-mailgned word, as highlighted in "Turtles"?

But in the immortal words of a US politician (You know who I mean!) "At this point, what difference does it make"? Isn't this a distraction when we should be focusing on the harms caused by the mRNA gene therapies in totality?

And I am still of the opinion that, in fact, the "Bad Lots" might, in fact be the "Good Lots". That sounds strange but I say that based on observations of the Global supply chains, that nobody has looked at. As a single strand, mRNA is fragile and quickly breaks down at temperatures above high minus C levels. Now, perhaps in the US and parts of Europe there MAY be a capability of manufacturing, freezing, storing, distributing to the point of use, then correctly unfreezing and quickly using the vials. It's the experience of most that the vials came out of a regular fridge and sat there while multiple folks were injected.

So perhaps most of those injections were already useless? That doesn't mean that the Plasmid/DNA contamination and the breakdown products of the mRNA could not cause longer-term harm, and that certainly isn't "Placebo", but in terms of the ability to cause immediate harm due to cellular spike production at the site of injection and beyond - probably not.

But the other aspect, also never looked at, that does seem starnge to me as someone with knowledge of the Pharmaceutical Industry, is WHY did the Lot sizes vary so much? mGMP requires rigorous manufacturing Bills of Materials and QA all the way through the process and retention of detailed batch records. In this system, Lots and Lot sizes are standardized so that the controls can be maintained. In view of this, the alleged WIDE variation in Lot sizes appears very irregular.

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This is one of the emails I received the other day. I get hundreds daily, and I am hearing you all.
This particular note spoke loudly to me and this lovely person gave me permission to share her words.
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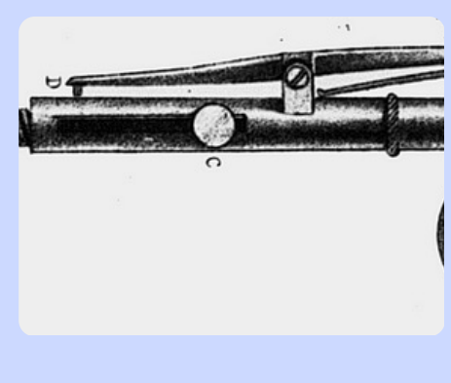

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Jessica Rose PhD, MSc, BSc and Peter A. McCullough MD, MPH
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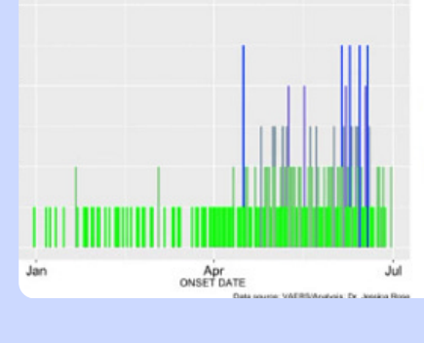

Rewrite: Let's tag team this until everybody understands
The modified spike protein is dangerous and for very specific reasons.
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